

AMENDED IN ASSEMBLY APRIL 18, 2005

CALIFORNIA LEGISLATURE—2005–06 REGULAR SESSION

ASSEMBLY BILL

No. 1572

Introduced by Assembly Member ~~Nakanishi~~ Dymally

February 22, 2005

An act to ~~amend Section 4903.05 of~~ add Section 4602.5 to the Labor Code, relating to workers' compensation.

LEGISLATIVE COUNSEL'S DIGEST

AB 1572, as amended, ~~Nakanishi~~ Dymally. Workers' compensation: ~~liens: filing fees: medical treatment: qualified diagnostic radiologists.~~

Existing workers' compensation law generally requires employers to secure the payment of workers' compensation, including medical treatment, for injuries incurred by their employees that arise out of, or in the course of, employment.

Existing law authorizes an insurer or employer to establish or modify a medical provider network composed of physicians primarily engaged in the treatment of occupational injuries and physicians primarily engaged in the treatment of nonoccupational injuries. Existing law provides that the insurer or employer shall have the exclusive right to determine the members of their network.

This bill, notwithstanding this provision, would authorize a physician treating a patient who may be suffering from a job-related injury to refer that patient to the qualified diagnostic radiologist, as defined, whom the physician believes can best perform the diagnostic radiological services needed to allow for coverage determination or treatment decisions regarding his or her patient. It would also prohibit any person other than a qualified diagnostic radiologist from

billing for diagnostic imaging procedures provided to workers seeking or obtaining care under the workers' compensation system.

~~Existing law establishes a workers' compensation system to compensate an employee for injuries sustained in the course of his or her employment. Under this system, the Workers' Compensation Appeals Board has jurisdiction to determine these claims. Existing workers' compensation law authorizes the appeals board to determine and allow certain expenses as liens against any sum to be paid as compensation.~~

~~Existing law requires a filing fee of \$100 to be charged for each initial lien filed by providers, or on behalf of providers, and requires the court administrator to adopt reasonable rules and regulations governing the procedures for the collection of the filing fee.~~

~~This bill would make a technical, nonsubstantive change to these provisions.~~

Vote: majority. Appropriation: no. Fiscal committee: no.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 *SECTION 1. Section 4602.5 is added to the Labor Code, to*
2 *read:*

3 *4602.5. (a) Notwithstanding Section 4616, a physician*
4 *treating a patient who may be suffering from a job-related injury*
5 *may refer that patient to the qualified diagnostic radiologist*
6 *whom the physician believes can best perform the diagnostic*
7 *radiological services needed to allow for coverage determination*
8 *or treatment decisions regarding his or her patient.*

9 *(b) No person other than a qualified diagnostic radiologist*
10 *shall bill for diagnostic imaging procedures provided to workers*
11 *seeking or obtaining care under this division.*

12 *(c) For purposes of this section, "qualified diagnostic*
13 *radiologist" means a physician and surgeon who meets all of the*
14 *following criteria:*

15 *(1) Is licensed by the State of California as a physician and*
16 *surgeon pursuant to Chapter 5 (commencing with Section 2000)*
17 *of Division 2 of the Business and Professions Code.*

18 *(2) Has completed an internship in a hospital-based training*
19 *program accepted by the Medical Board of California.*

1 (3) *Has completed a residency program in diagnostic*
2 *radiology and is board eligible or board certified in that*
3 *specialty by the American Board of Radiology.*

4 (4) *Has met Continuing Medical Education (CME)*
5 *requirements of the Medical Board of California and shows*
6 *continued education in the field of diagnostic radiology of at*
7 *least 30 credits per year of the yearly required CME credits.*

8 ~~SECTION 1.~~

9 SEC. 2. Section 4903.05 of the Labor Code is amended to
10 read:

11 4903.05. (a) A filing fee of one hundred dollars (\$100) shall
12 be charged for each initial lien filed by providers, or on behalf of
13 providers, pursuant to subdivision (b) of Section 4903.

14 (b) No filing fee shall be required for liens filed by the
15 Veterans Administration, the Medi-Cal program, or public
16 hospitals.

17 (c) The filing fee shall be collected by the court administrator.
18 All fees shall be deposited in the Workers' Compensation
19 Administration Revolving Fund. Any fees collected from
20 providers that have not been redistributed to providers pursuant
21 to paragraph (2) of subdivision (b) of Section 4603.2, shall be
22 used to offset the amount of fees assessed on employers under
23 Section 62.5.

24 (d) The court administrator shall adopt reasonable rules and
25 regulations regarding the procedures for the collection of the
26 filing fee.